	GN FINANCE REPO IMITTEES OF WISO	0.00/70.007/07/07	3	RECEIVED FEB 2016 Sandra L. Juno Brown County Clerk
Is This Report an Amendment:	☑ No		1	BECEIVED &
Instructions for completing schedules are on the b	ack of each schedule.		778793031	FEB 2016   167
COMMITTEE IDENTIFICATION			293(	candra L. Juno
Name of Committee			1.85	Brown County Clerk
Friends of Mark Becker Street Address			OF	FICE USE ONLY
248 Williams Street				
Pulaski, WI 54162				
Please check if address is different than previously reported,	and complete the Campaign	Registration St	atement in t	he back of this form.
NAME OF REPORT				
☐ January Continuing ☐ Pre-Primary ✓ 为	Spring ☐ Fal	l Spe	cial	☐ Termination Report
July Continuing Pre-Election	Spring Fal	II Spec	cial	also complete Schedule 4
SUMMARY OF RECEIPTS AND	Column A	Colum	ın B	
DISBURSEMENTS	This Period	Calen	dar	*
1. RECEIPTS		Year-To	-Date	
1A. Contributions (Including Loans) from Individuals	\$ 1,735.00	\$ 1,739	5.00	
1B. Contributions from Committees (Transfers-In)	\$ —	\$ -		
1C. Other Income and Commercial Loans	\$ -	\$ -		
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 1,735.00	\$ 1,735	,00	
2. DISBURSEMENTS				
2A. Gross Expenditures	\$ 557.14	\$ 557	.14	
2B. Contributions to Committees (Transfers-Out)	\$ <del>-</del>	\$		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 557.14	\$ 557,	.14	
CASH SUMMARY				
Cash Balance Beginning of Report	\$ 0.00			
Total Receipts	\$ 1735.00			
Subtotal	\$ 1735,00			
Total Disbursements	\$ 557.14			
CASH BALANCE END OF REPORT	\$ 1,177.86			
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0.00			
LOANS (Balance at the Close of This Period-3B)	\$ 400.0D			
I certify that I have examined this report and to the best of		it is true, corr	ect and con	ıplete.
	ature of Candidate or Treasurer		Date:	2/7/16
Kelly R. Ruh, Treasurer Ke	lly R. Ruh, Tre	usures)	Daytime Ph	one: 920 -660 -7378

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

Pq.

SCHEDULE 1-A

## RECEIPTS Contributions (Including Loans) From Individuals

Page 1 of 3

Complete Committee Name Friends of Mark Becker Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place Amount Calendar Dennis Marcelle Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 1/19/16 1832 Fiesta Ln. \$ 50 \$ 50 Green Bay W1 54302-2226 Check if: In-Kind Loan Conduit Conduit Name: Date Occupation, Name and Address of Principal Place Calendar Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total Frederick J. Krumberger 1/19/16 3196 Harbor Winds Dr. Suamico, WI 54173 \$ 50 \$50 Check if: In-Kind Loan Conduit Conduit Name: Date Occupation, Name and Address of Principal Place Calendar Amount Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total Judith Krawczyk 2495 Manitowoc Rd. 1 /19/16 \$ 50 \$ 50 Green Bay WI 54311-5377 Check if: In-Kind I Loan Conduit
Full Name, Mailing Address and Zip Code Conduit Name: Occupation, Name and Address of Principal Place Amount Calendar Richard J. Debroux Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 1/19/16 1713 Preble Ave. \$ 50 \$50 Green Bay, WI 54302-2934 Check if: In-Kind Loan Conduit
Full Name, Mailing Address and Zip Code Conduit Name: Occupation, Name and Address of Principal Place Calendar Amount Of Employment (if year-to-date total exceeds \$100) 1/19/16 Year-to-Date Total Lyle Becker 619 Green bell St. \$ 25 \$15 Green Bay WI 54301-1716 Check if: In-Kind Doan Conduit Conduit Name: Date Occupation, Name and Address of Principal Place Amount Calendar Of Employment (if year-to-date total exceeds \$100) 1 19/16 Year-to-Date Total David B. Fritsch 2380 Pinecrest Ln. \$100 Green Bay WI 54313 Check if: In-Kind Loan Conduit
Full Name, Mailing Address and Zip Code Conduit Name: Occupation, Name and Address of Principal Place Amount Calendar Mark T. Zeller 1500 Greenfield Ave. Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 1/19/16 \$25 Green Bay, WI 54313 Check if: In-Kind Loan Conduit Conduit Name: Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place Calendar Amount Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 11916 Kelly R. Ruh \$ 5o 203 Gray Street \$ 50 Green Bay, W1 54303 Check if: In-Kind Loan Conduit Conduit Name: \$ 400.00 SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE TOTAL ITEMIZED CONTRIBUTIONS **TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS** 

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

# RECEIPTS Contributions (Including Loans) From Individuals

Page <u>2</u> of <u>3</u>

Complete Committee Name Friends of Mark Becker

111010	O OI THAT NOCCHET			
Instructions t	for completing schedules are on the back of e	ach schedule.		•
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
11,19,16	Daniel L. Terrien	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
	2000 Jourdain Lane	!		<i>\$3</i> 5
	2000 Journain Lane	•	<b>\$35</b>	30
	Green Bay, WI 54301			····
	7.10.07507	i i		
	Chack if: [Cla Kind [G] Boards	Conduit blame	i	
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place		
	Carada - 7	Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
119116	Candoce Ziegelbauer 1934 E. Telemark Circle	1		1 ear-to-Date rotal
	1934 E. Telemark Circle	į	1	\$100
	Grand Ray I'M GURIA	1 	\$100	00
	Green Bay WI 54313-4342	<u>;</u> 		
	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
1,19,16	Sandra M. Duckett	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
1.1.1.16			·	\$ 50
	2552 Wilder Ct.		マグ イン	\$ JO
	Green Bay WI 54311		<b>*</b> UU	
	1			
1	Check if: [1] In-Kind [7] can Conduit	Conduit Name;		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
11.00.11	Robert L. Cowles	Of Employment (if year-to-date total exceeds \$100)	/ whoulk	Year-to-Date Total
1/19/16	RUDEIT L. COWIES	•		
	300 W. St. Joseph St.		40-	\$25
	Green Bay, WI 54301-2371		\$25	
	01 -01.04,711.01001 2011			
	Check if: The Kind The conflict	Conduit Name:		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	A	0-11
1	Dayl D Koch	Of Employment (if year-to-date total exceeds \$100)	Amount	Catendar Year-to-Date Total
1 122/16	Paul D. Koch 5374 Moonlite Dr. De Pere, WI 54115-8794			
1 .	5574 PROVINITE DI		4	\$100
	Depere, WI 54113-8-179		\$100	
			-	
	Charlette Electrical Electrical	Considerit Manager		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
1	ا ما	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 /27 /16	Gary Tauchen N3397 S. Broadway			
/	N3397 S Broadwall			\$100
	Bonduel, W1 54107		\$ 100	.,,,,
	BUILDING, WI 34101			
1				
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
11 122 16	Micrelle M. Nelson 480 St. Mary & Blvd.	Of Employment (if year-to-date total exceeds \$100)	j l	Year-to-Date Total
,	480 St. Mary & Blud			tinn
	Gran Day III DIZA		\$ 100	\$100
	Green Bay, WI 54301		4100	
	·			
	Check if: In-Kind In Loan Conduit	Conduit Name:		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
1	Carol Bourgesis	Of Employment (if year-to-date total exceeds \$100)	, instant	Year-to-Date Total
1 /22/16	Carol Bourgeois N6027 Cty C			
	NOOF I CTY		\$100	\$100
	Casco, WI 54205		1 4,00 F	
	-	•		
1 1	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:		
<u> </u>	Values in Columnia In Found Columnia	O THE GREAT PROPERTY OF THE PR		
	SUBTO	TAL ITEMIZED CONTRIBUTIONS THIS PAGE	s 610.00	
	33513	The state of the s		
		TOTAL ITEMIZED CONTRIBUTIONS	s —	
			_	
	TOTAL	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$	
	TOTAL CON	TRIPLITIONS DECENTED EDOM NON COLUMN	s	D, 3
	TOTAL CON	TRIBUTIONS RECEIVED FROM INDIVIDUALS	٧	Pa

#### RECEIPTS Contributions (Including Loans) From Individuals

Page 3 of 3

Complete Committee Name Friends of Mark Becker Instructions for completing schedules are on the back of each schedule.

Date Full Name, Mailing Address and Zip Code Occupation, I Occupation, Name and Address of Principal Place Amount Calendar Of Employment (if year-to-date total exceeds \$100) Benjamin J. Vineburg 14611 Ludlow St. Year-to-Date Total 122/16 ¥25 \$ 25 Oak Park, MI 48237 Check if: In-Kind Loan Conduit Conduit Name: Date Occupation, Name and Address of Principal Place Calendar 1,22,16 Peter J. Ingold Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 1104 Marquette Ave. Green Bay, WI 54304 \$ 100 \$100 Check if: In-Kind Loan Conduit Conduit Name: Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place Amount Calendar Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 1 122 116 Robert G. Bush 3062 Bay View Dr. \$/*0*0 \$ 100 Green Bay, WI 54311 Check if: In-Kind Loan Conduit
Full Name, Mailing Address and Zip Code Conduit Name: Date Occupation, Name and Address of Principal Place Amount Calendar Ann H. Shea Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 1 112/16 711 N. WebSter Ave. \$ 50 De Pere, WI 54115-3432 \$.50 Check if: In-Kind Loan Conduit Conduit Name: Occupation, Name and Address of Principal Place Amount Calendar Marvin Bourgeois Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 1 12/16 \$50 Casco, WI 54205-9727 \$50 Check if: In-Kind Loan Conduit Conduit Name: Full Name, Mailing Address and Zip Code Mark S. Becker 248 Williams St. Date Occupation, Name and Address of Principal Place Calendar Amount Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 11416 Finance Manager \$400 LEMICUY TOYOTA Pulaski, WI 54162 \$400 2550 S. Oneida St. Green Bay, WI 54304 Check if: In-Kind Loan Conduit
Full Name, Mailing Address and Zip Code Conduit Name: Date Occupation, Name and Address of Principal Place Amount Calendar Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total Check if: In-Kind Loan Conduit Conduit Name: Date Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place Amount Calendar Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total 1 Check if: In-Kind Loan Conduit Conduit Name: SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$725,00 \$1,735,00 **TOTAL ITEMIZED CONTRIBUTIONS** TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS \$1,735.00 TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

## DISBURSEMENTS Gross Expenditures

Page 1 of 1

Complete Committee Name
Friends OF Mark Becker

Instructions for completing schedules are on the back of each schedule.

Date   Full Name, Mailing Address and Zip Code   1   19   10   19   10   10   10   10	msu ucuons for	completing schedules are on the back of each schedule.		
1111/0   Heyrman Printing   Yard Signs   Campaign   \$413.44     Conceit:	_	Full Name, Malling Address and Zip Code	Specific Purpose of Expenditure	Amount
Date Date Of Paul Name, Mailing Address and Zip Code Date Date Date Date Date Date Date Dat	1,19,16	Heurman Orintina	Vard Signs /Comming	
Check II:   In-Kind Offset   Check II:   In			Materials	\$412 40
Date   Full Name, Mailing Address and Zip Code   Check if:   In-Kind Offset   Check if:   In-Kind Off			Macras	7 110.17
1/20   10   Titlethum BrewenyTap Room   Ro		Check if: I In-Kind Offset	J	
1/20   10   Titlethum BrewenyTap Room   Ro	Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
Date Full Name, Mailing Address and Zip Code  Or Person or Bushiess to Whom Payment is Made  Politic Full Name, Mailing Address and Zip Code  Or Person or Susiness to Whom Payment is Made  Date Full Name, Mailing Address and Zip Code  Or Person or Business to Whom Payment is Made  Date Full Name, Mailing Address and Zip Code  Or Person or Business to Whom Payment is Made  Date Full Name, Mailing Address and Zip Code  Or Person or Business to Whom Payment is Made  Date Full Name, Mailing Address and Zip Code  Or Person or Business to Whom Payment is Made  Date Full Name, Mailing Address and Zip Code  Or Person or Business to Whom Payment is Made  Date Full Name, Mailing Address and Zip Code  Or Person or Business to Whom Payment is Made  Check If: In-Kind Offset  Date Full Name, Mailing Address and Zip Code  Of Person or Business to Whom Payment is Made  Check If: In-Kind Offset  Date Full Name, Mailing Address and Zip Code  Of Person or Business to Whom Payment is Made  Check If: In-Kind Offset  Date Full Name, Mailing Address and Zip Code  Of Person or Business to Whom Payment is Made  Check If: In-Kind Offset  Date Full Name, Mailing Address and Zip Code  Of Person or Business to Whom Payment is Made  Check If: In-Kind Offset  Date Full Name, Mailing Address and Zip Code  Of Person or Business to Whom Payment is Made  Check If: In-Kind Offset  Date Full Name, Mailing Address and Zip Code  Of Person or Business to Whom Payment is Made  Check If: In-Kind Offset  Date Full Name, Mailing Address and Zip Code  Of Person or Business to Whom Payment is Made  Check If: In-Kind Offset  Date Full Name, Mailing Address and Zip Code  Of Person or Business to Whom Payment is Made  Check If: In-Kind Offset  Date Full Name, Mailing Address and Zip Code  Of Person or Business to Whom Payment is Made	1 120/16	Titletown Browness / Tan Coons	Room Rental for	
Date				\$ 55.00
Date   Full Name, Mailing Address and Zip Code   Specific Purpose of Expenditure   Amount   Advertising for Campaign on Facebook   Specific Purpose of Expenditure   Amount   Advertising for Campaign on Facebook   Specific Purpose of Expenditure   Amount   Advertising for Campaign on Facebook   Specific Purpose of Expenditure   Amount   Advertising for Campaign on Facebook   Specific Purpose of Expenditure   Amount   Expenditure   Expend		Green Bay WI 54303 Checkiff Id In-Kind Offset	, since cong Everit	
1/25/16   Super Ron is   Stamps for Campaign mailing   \$49.00	Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
Specific Purpose of Expenditure   Amount	1/25/11-		Stamps for	
Check if:	. 20 16	1960 (4. Par 10	Canno in mailing	\$ 110
Check if:     In-Kind Offset   Amount		Pulaski WI SALLO	campaign maining	¥ 49,00
Of Person or Business to Whom Payment is Made Facebook  Check if: In-Kind Offset  Date 2 / 3 / Ib  Date 2 / 3 / Ib  Date Date Date Date Date Date Date Dat		Check if:  In-Kind Offset		
Date   Date   Full Name, Mailing Address and Zip Code   Of Person or Business to Whom Payment is Made   Check if:   In-Kind Offset   In-Kind Offset   Date   Date   Full Name, Mailing Address and Zip Code   Of Person or Business to Whom Payment is Made   Heyrman Printing   Amount   LabelS for Yard   \$26.25	Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
Check if: In-Kind Offset  Date 2 / 3 / Ib  Date Date Date Date Date Date Date Dat	2/1/16		Advertising for	
Check if:	- , .0	FACEBOOK	Campaign on Facebook	\$ 13.45
Date 2 / 3 / 16 2 / 3 / 16 2 / 3 / 16 2 / 3 / 16 2 / 3 / 16 2 / 3 / 16 3 / 16 2 / 3 / 16 2 / 3 / 16 2 / 3 / 16 3 / 16 2 / 3 / 16 3 / 16 4 / 17 2 / 18 / 18 / 18 / 18 / 18 / 18 / 18 / 1			Jos Pagin and Account	. 10.13
Specific Purpose of Expenditure   Specific Purpose of Expenditure   Amount		Check if:  In-Kind Offset		
Heymman Printing 2 D83 Ho Imgren Way Check if:		Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
Date   Full Name, Mailing Address and Zip Code   Specific Purpose of Expenditure   Amount	2/3/16		Labels for ward	
Check if:  In-Kind Offset  Date   Full Name, Mailing Address and Zip Code   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount    Check if:  In-Kind Offset   Specific Purpose of Expenditure   Amount   Spec		2083 Holmaren Way	Sins	<del>\$</del> 26.25
Check if:		Green Bay, WI 54304		
Check if: In-Kind Offset  Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Check if: In-Kind Offset  Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Specific Purpose of Expenditure Amount  Specific Purpose of Expenditure Amount  Specific Purpose of Expenditure Amount		Check if:  In-Kind Offset		
Check if:	Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
Date Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Date Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Check if: In-Kind Offset  Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Specific Purpose of Expenditure Amount  Specific Purpose of Expenditure  Amount	/ /	Of Classific Business to Witolit Payitiest is Made		
Date Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Date Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Check if: In-Kind Offset  Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Specific Purpose of Expenditure Amount  Specific Purpose of Expenditure  Amount		•		
Date Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Date Of Person or Business to Whom Payment is Made  Check if: In-Kind Offset  Check if: In-Kind Offset  Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made  Specific Purpose of Expenditure Amount  Specific Purpose of Expenditure  Amount				
Of Person or Business to Whom Payment is Made  Check if:  In-Kind Offset  Date    Full Name, Mailing Address and Zip Code				
Check if:  In-Kind Offset  Date Full Name, Mailing Address and Zip Code	Date		Specific Purpose of Expenditure	Amount
Date   Full Name, Mailing Address and Zip Code   Specific Purpose of Expenditure   Amount	1 1	Of Foreign of Dusiness to Persons a dyment is made		
Date   Full Name, Mailing Address and Zip Code   Specific Purpose of Expenditure   Amount				
Date   Full Name, Mailing Address and Zip Code   Specific Purpose of Expenditure   Amount				
Of Person or Business to Whom Payment is Made  Check if:  In-Kind Offset  Date				
Check if:  In-Kind Offset  Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount  Of Person or Business to Whom Payment is Made	Date		Specific Purpose of Expenditure	Amount
Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made  / /	1 1	Of Clash of Eddiness to varion Payment is Made		
Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made  / /				
Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made  / /				
Of Person or Business to Whom Payment is Made				
	Date		Specific Purpose of Expenditure	Amount
Check if: 🔲 In-Kind Offset	1 1	Or i brack or business to verton rayment is made		
Check if:				
Check if:			.	
		Check if: 🔲 In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 557.14
TOTAL ITEMIZED EXPENDITURES	\$ 557.14
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS	\$ 
TOTAL EXPENDITURES	\$ 557 .14

pg. 5

## SCHEDULE 3-B

#### ADDITIONAL DISCLOSURE

Page \_ | of \_ |

#### Loans Individual, Committee or Commercial

Friend	mittee Name S OF Mark Bel	cker					
		on the back of each schedule.					
	Full Name Mailing Address an	d Zin Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period	
Date 14/16	Mark S. Beck 248 WilliamS Pulaski, WI	54.162.	0	\$400	O.	\$400	
List All Endorse	rs or Guarantors (if any)						
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation					
N/A		Name and Address of Employer					
		Amount Guaranteed Outstanding					
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation					
N/A		Name and Address of Employer					
		Amount Guaranteed Outstanding	· · · · · · · · · · · · · · · · · · ·				
Date	Full Name, Mailing Address and	\$ d Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period	
/ /	rs or Guarantors (if any)	THE PROPERTY OF THE PROPERTY O			leon.sporazsk		
	• • • • • • • • • • • • • • • • • • • •						
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation					
		Name and Address of Employer					
		Amount Guaranteed Outstanding					
Full Name, Mail of Guarantor	ing Address and Zip Code	S Occupation					
		Name and Address of Employer					
		Amount Guaranteed Outstanding					
Date	Full Name, Mailing Address and	∤ \$ d Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period	P.
/ /	rs or Guarantors (if any)		***************************************		The latest and		
LIST All Engorse	rs or Guarantors (if any)						
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation					
		Name and Address of Employer					
		Amount Guaranteed Outstanding		***************************************			
	ing Address and Zip Code	\$ Occupation					
of Guarantor		Name and Address of Employer	· · · · · · · · · · · · · · · · · · ·				
		Amount Guaranteed Outstanding					E. F. V
·		\$				<u>Basemberija (Car</u>	<u>; -, ;</u>

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ 400

TOTAL OUTSTANDING LOANS \$ 400

CAMPAIO LOCAL COM	1780 H-500014	RECEIVED FEB 2016 Sandra L. Juno Brown County Clerk	
Is This Report an Amendment:	□ No		A STUTED AND
Instructions for completing schedules are on the ba	ack of each schedule.		RECEIVED 36
COMMITTEE IDENTIFICATION			FEB 2016 178
Name of Committee  Jemie Blom for District ?  Street Address	3		
2883 Hillcrest (+			OFFICE USE ONLY
City, State and Zip Code Green Bay, WI 54313			
Please check if address is different than previously reported, a	nd complete the Campaign l	Registration State	ment in the back of this form.
NAME OF REPORT			
January Continuing Pre-Primary 40/6	Spring Fall	Special	Termination Report
July Continuing Pre-Election	Spring Fal	l Special	The second secon
SUMMARY OF RECEIPTS AND	Column A	Column I	
DISBURSEMENTS	This Period	Calendar	
1. RECEIPTS		Year-To-Da	ate
1A. Contributions (Including Loans) from Individuals	\$ 130.00	\$ 130.00	
1B. Contributions from Committees (Transfers-In)	\$	\$	
1C. Other Income and Commercial Loans	\$	\$	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 130.	\$ 130.00	<u></u>
2. DISBURSEMENTS			
2A. Gross Expenditures	\$ 164.00	\$	
2B. Contributions to Committees (Transfers-Out)	\$	\$	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 164.00	\$ 144.00	
CASH SUMMARY			
Cash Balance Beginning of Report	\$ 467,00		
Total Receipts	\$ 130.00		
Subtotal	\$ 597.00		
Total Disbursements	\$ 164.00		
CASH BALANCE END OF REPORT	\$ 433		
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$		
LOANS (Balance at the Close of This Period-3B)	\$		

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 2/8/14
and I	Drue Lon	
Jamie Blom	Janua Poor	Daytime Phone: 920-265-1272

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

## SCHEDULE 1-A

## RECEIPTS Contributions (Including Loans) From Individuals

Complete Com				
	noe Blom for Distri			
Instructions fo	or completing schedules are on the back of ear Full Name, Mailing Address and Zip Code	ach schedule. ! Occupation, Name and Address of Principal Place	Amount	Calendar
1	,	Occupation, Name and Address of Fittingal Flace Of Employment (if year-to-date total exceeds \$100)	Altioutit	Year-to-Date Total
1/25/14	Joel Chrauth		100,00	
-	5 Maria de la colonia		1000	
	2114 Kingfisher Lr Suamico, WI 54813	, 		
	Sulmito, WI 39815			
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place		Calendar
		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	30.00	Year-to-Date Total
2/1/16	Jamie Blom 2883 Hillerest Ct		30.	
	2883 tillerest Cr	ŕ		
	Green Bay, WZ 54313	• •		
	Check if: An-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 1		Control (in July to data total except \$ (50)		, 00, 10-00,0 , 0101
1			-	
	Check if: In-Kind Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
, ,		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
			:	
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
, ,		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
' '				
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
, ,		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
' '				
		O code W Marcon		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
	Tuli Hame, Mailing Address and Zip Gode	Of Employment (if year-to-date total exceeds \$100)	Allount	Year-to-Date Total
/ /				
	_			
	Check if: In-Kind Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 1		,,		
	Check if: CIn-Kind CLoan Conduit	Conduit Name:		
		OTAL ITEMIZED CONTRIBUTIONS THE P. C.	\$ 120,00	
	SUBT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 130	
		TOTAL ITEMIZED CONTRIBUTIONS	\$ 130,00	
		WITHINGS COURSE WAS ASSESSED.		
	TOTAL	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$	pa. 2
	TOTAL COI	NTRIBUTIONS RECEIVED FROM INDIVIDUALS	s BO.00	VG - 0)

## DISBURSEMENTS Gross Expenditures

Page \_ / of \_ /

Complete Committee Name			
on i	Λ		A A
1. (. 4)-4 10-10-10-10	- major	DICALITY	1.5
JAMIL DOM	4-0 r	6131161	

Instructions for completing schedules are on the back of each schedule. Specific Purpose of Expenditure Amount Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made \$49.00 1/11/14 Green Bay MPO 300 Packerland Dr Postage Green Bay, WI 54303 Check if: 1 In-Kind Offset Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Specific Purpose of Expenditure Amount Date 66.60 1/11/16 Target Green By West Envelopes Check if: In-Kind Offset Full Name, Mailing Address and Zip Code
Of Person or Business to Whom Payment is Made Specific Purpose of Expenditure Amount Date 1/20/16 Green Bay MPD Postage 300 Packerland Or Check if: I In-Kind Offset Specific Purpose of Expenditure Amount Date Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Green Bay MPD 300 Packerland Dr Green Bay, WI 54303 1/2//16 Postage Check if: In-Kind Offset Specific Purpose of Expenditure Amount Full Name, Mailing Address and Zip Code Date Of Person or Business to Whom Payment is Made \$30.00 2/1/16 Voter list GAB Check if: In-Kind Offset Amount Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Date Of Person or Business to Whom Payment is Made Check if: 🔲 In-Kind Offset Amount Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Date Of Person or Business to Whom Payment is Made Check if: n-Kind Offset Full Name, Mailing Address and Zip Code
Of Person or Business to Whom Payment is Made Specific Purpose of Expenditure Amount Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Date Of Person or Business to Whom Payment is Made 1 Check if: In-Kind Offset SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE TOTAL ITEMIZED EXPENDITURES

\*\*\*End of Report\*\*\*

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$ 164 00 09 . 2

Campaign Finance Report Short Form ETHCF-2a	Ethics ID Number
Spring O Fall O Special Pre-Primary XXIIB	Pre-Primary XXIIB Continuing Report due Jan. 15,
Po Spring P Fall P Special Pre-Election P	O Continuing Report due July 15,
Alex Galt P	O Continuing Report due 4 <sup>th</sup> Tues Sept.,
GALT for BROWN COMNTY	TM
Name of Candidate or Committee (in full)	mittee (in full) 1426 S. JACKGON ST, Green Boy
Address	
920 246-0199	
Daytime Phone	
I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as praviously reported. This report fulfills filing requirements under Sec. 11.0103(3)(d), Stats.	ot receive contributions or other income, make of by this report and that the cash balance remains equirements under Sec. 11.0103(3)(d), Stats.

ETHCF-2a | Rev 01/2016 | Government Accountability Board J.P.O | Box 7984, Madison, WI 53707-7984 | Phone: 608-261-2028 | Fax: 608-264-9319 | Web: https://cfis.wi.gov | Email: GABCFIS@wi.gov

Signature of Committee Treasurer of Cardidate

Date /

Email Address

aled known a. com

# \*\*\*End of Report\*\*\*

				000000000000000000000000000000000000000	and the state of t
CAMPAIGN LOCAL COMM	FINANCE REP		N	6	25252728203
					Sandra J. Juno Hown County Clerk
Instructions for completing schedules are on the back	of each schedule.			/ 500	
COMMITTEE IDENTIFICATION				1819202	WECEN SOIL
Name of Committee				100	GANIZO
SUENVEN FOR COUNTY BOAS Street Address  2563 TURNBURY ROAD  City, State and Zip Code  GREEN BAY, WI 54313	<b>X</b> 4			OF	FICE USE ONL
City, State and Zip Code  City State and Zip Code					STATE ISTITUTE
GAREN BAY, WI SY313				_	
Please check if address is different than previously reported, and	complete the Campaig	n Registrat	ion Statem	ent in the b	ack of this form.
NAME OF REPORT					
☐ January Continuing ☐ Pre-Primary ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	5.81,2016 Spring	☐ Fall	□ s <sub>p</sub>	pecial	Termination Report
SUMMARY OF RECEIPTS AND	G-1 A	-	C-1	- D	
DISBURSEMENTS	Column A This Period		Columi		
1. RECEIPTS			Year-To-	-Date	9
1A. Contributions (Including Loans) from Individuals	\$ 1,00000	\$	100	00 00	
1B. Contributions from Committees (Transfers-In)	\$	\$			
1C. Other Income and Commercial Loans	\$	\$	The Australian Company		
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 1.000.4	\$	1.000	200	
2. DISBURSEMENTS					
2A. Gross Expenditures	\$ 10000	\$			
2B. Contributions to Committees (Transfers-Out)	\$	\$			
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1000	\$			
CASH SUMMARY					
Cash Balance Beginning of Report	\$ -0-	-			
Total Receipts	\$ 1,000	90			
Subtotal	\$ 1,000				
Total Disbursements	\$ /66	00			
CASH BALANCE END OF REPORT	s 900	100			
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 24/171				
LOANS (Balance at the Close of This Period-3B)	\$ -0-	.			

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 2/7/16
RAYMONE SUELINEN	Emply Ray Survived & MAHOO COM	Davime Phone: 210-6 26 028
	Email MAN SULVILLA & NAMEDO COL	Daytime Filone. 180 Des 5307

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

ETHCF-2L (Rev. 01/16) The Government Accountability Board prescribes this form. Completed forms must be filed with your local clerk.

SCHEDULE 1-A

# RECEIPTS Contributions (Including Loans) From Individuals

Page \_\_\_\_ of \_\_\_\_

Complete Comm	SUENNED FOR COUNTY BOA	up		
Instructions for Date	r completing schedules are on the back of each sc Full Name, Mailing Address and Zip Code	hedule.  ; Occupation (if year-to-date total exceeds \$200)	Amount of	Y-T-D
Date	Of Contributor	Occupation (if year-to-date total exceeds \$250)	Contribution	Total
, (	RAYMOND SWEMMEN 12563 TURNBURY Rd 6REEN BAY, WI 5430	Cardedate		
1/4/16	2012 Tuesting Rd		1,000€	10000
	( ) Bree 1117 542	Compliance MANAGER	7,000	1900
•	CAELN BUY, WL 2130			
	Check if: In-Kind Loan Conduit - Ethics ID#			
·	Check if: [] In-Kind [] Loan Conduit - Ethics ID#		ļ	
		:		
	Check if: [] In-Kind [] Loan Conduit - Ethics ID#			
		1		
		1	Attended	
			ĺ	
	Check if: In-Kind E Loan Conduit - Ethics ID#			
	Check if: In-Kind Loan Conduit - Ethics ID#			
			]	
		6 6		
	Check if: In-Kind Loan Conduit - Ethics ID#	1		
		-		
	Check if: In-Kind Laan Conduit - Ethics ID#			
	CHRTOTAL	ITEMIZED CONTRIBUTIONS THIS PAGE	s 1,000R	1.000
	SUBTUTAL	5 /,000.00	/ 600 ·C	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			\$	1,000,00
	TOTAL CONTRIB	s /,000,00	1,000,00	

## DISBURSEMENTS Gross Expenditures

Page / of /

Complete Commi	ttee Name		
SUEL	WEN FER COUNTY BOARD		
Instructions for	completing schedules are on the back of each schedule.		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
1/21/16	ANTS OF MAN 1314 FORTER CASE BAY, WIT SYJUS Check if: [] In-Kind Offset	Deposit an Sign	100,00
	Check if: [[] In-Kind Offset		
	Check if: C In-Kind Offset		
	Check if: [] In-Kind Offset		
	Check if: C In-Kind Offset		
	Check if: In-Kind Offset		
	Check if: Th-Kind Offset		
	Check if: In-Kind Offset		
	SUB	TOTAL ITEMIZED EXPENDITURES THIS PAGE	s 100 00 100 00
		TOTAL ITEMIZED EXPENDITURES	s 100 =
		TOTAL UNITEMIZED EXPENDITURES	\$
		TOTAL EXPENDITURES	s 10000

SCHEDULE 3-A

## Incurred Obligations Excluding Loans ADDITIONAL DISCLOSURE

Page \_\_\_\_/ of \_\_\_/

,	mmittee Name		<del></del>						
Sux	What FOR COUNTY BORK								
Instructions for completing schedules are on the back of each schedule.									
		Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative This P		Outstanding Balance At Close of This Period			
Date / 1241/6	Full Name, Mailing Address and Zip Code of Creditor  OFFICE May	-0-	6.29	-0 \$		629			
-,	OFFICE MAY 2817 S. OWE, ANST CASES BAY, UIT 54/303 Full Name, Mailing Address and Zip Code of Creditor	Nature of Debt (Purpose)			www.				
Date /1241/6	Full Name, Mailing Address and Zip Code of Creditor  UALMANT 2440 W Mesai ST	-0-	137.42	- 0-		137.42			
.,,,	2440 W Mesai ST GREEN BAY, ULT 54303 Full Name, Mailing Adgress and Zip Code of Creditor	Nature of Debt (Purpose)							
Date / 45/6	IL THASTER			-0		98,00			
	300 PHILEALAND DR GASEN BAY, WI 54303	Nature of Debt (Purpose)	98.00 STAMPS						
Date	Full Name, Mailing Address and Zip Code of Creditor								
1 1		Nature of Debt (Purpose)		,		, do anno antigo de la companio de l			
Date	Full Name, Mailing Address and Zip Code of Creditor	1	]						
, ,	•								
		Nature of Debt (Purpose)							
Date	Full Name, Mailing Address and Zip Code of Creditor								
1 1									
		Nature of Debt (Purpose)							
Date	Full Name, Mailing Address and Zip Code of Creditor								
1 1									
		Nature of Debt (Purpose)							
Date	Full Name, Mailing Address and Zip Code of Creditor								
1 1									
		Nature of Debt (Purpose)							
L		SUBTOTAL ITEMIZE	D OBLIGATIONS THIS I	PAGE \$		241.71			
TOTAL ITEMIZED OBLIGATIONS					241,71 34/191				
TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS									
TOTAL INCURRED OBLIGATIONS						24/1,71			
*	**End of Report***					PG. 4			